



**CITY OF MANCHESTER
ZONING BOARD OF ADJUSTMENT
ONE CITY HALL PLAZA
MANCHESTER, NH 03101-2097
Tel: (603) 624-6328
Fax: (603) 624-6529**

APPLICATION FOR ADMINISTRATIVE APPEAL

Complete the following and attach any supplemental material to support your appeal.

Property Location: _____
Zoning District: _____ Map/Lot No.: _____

Applicant: _____
Address: _____
Phone No. _____ Check No.: _____

1. Name and title of person, Board or other authority whose decision you are appealing: _____

2. Nature of the decision you are appealing: _____

3. Section of the Zoning Ordinance involved, if applicable: _____

4. Date of the decision appealed from: _____

The appeal is made for the following reasons:

ZBA decisions on administrative appeals are governed by New Hampshire Revised Statutes Annotated, Chapter 674:33 I (a).

Signature: _____

Date: _____